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DATE: December 6, 2004	PAGES SENT: 3
FROM: Chris A. Caseiro	CLIENT NO: 99999-9999
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COMMENTS

Please see the attached power of attorney re application serial no. 09/557,252. Thank you for your attention to this matter.

--Chris A. Caseiro

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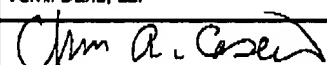
PTO/SB/21 (08-04)

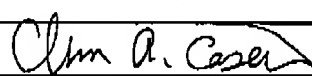
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/557,252	RECEIVED CENTRAL FAX CENTER DEC 06 2004
	Filing Date	April 24, 2000	
	First Named Inventor	Justin Page	
	Art Unit	2172	
	Examiner Name	Allard W. Kindred	
Total Number of Pages in This Submission	2	Attorney Docket Number	

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
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<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Verrill Dana, LLP		
Signature			
Printed name	Chris A. Caselro		
Date	December 6, 2004	Reg. No.	34,304

CERTIFICATE OF TRANSMISSION/MAILING			
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Signature			
Typed or printed name	Chris A. Caselro	Date	December 6, 2004

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**POWER OF ATTORNEY
and
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INDICATION FORM**

Application Number	09/557,252
Filing Date	April 24, 2000
First Named Inventor	Justin Page
Title	Systems and Methods for ...
Art Unit	2172
Examiner Name	Alford W. Kindred
Attorney Docket Number	

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number:

35557

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☐ Practitioner(s) named below:

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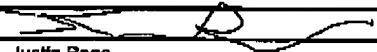
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I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Signature		Date	December 8, 2004
Name	Justin Page	Telephone	207-299-1911
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

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